

05/09/2014 10:27 1718-266-7478

BROOKLYN SOUTH

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MV-984 (12/11)



New York State Department of Motor Vehicles
DIVISION OF LABOR RELATIONS

REPORT OF WORKPLACE VIOLENCE INCIDENT

Please fill out the form as accurately as possible and fax it to the Division of Field Investigation at (518) 474-7543 **AND** Labor Relations at (518) 474-8423. If the incident is a written threat, please include a copy of the letter with this report. Originals should be maintained in a workplace violence report folder at the primary office that the reporter works in.

OFFICE USE ONLY	
FILE NUMBER:	<i>519114-Reviewed-NB</i>
Received:	<i>please follow up with [unclear] thanks</i>
X RE:	
X RE:	
PRIVACY CONCERN:	<input type="checkbox"/> YES <input type="checkbox"/> NO

NAME OF INDIVIDUAL FILING REPORT

Name <i>Geri P. Piro</i>	Title <i>SMVRI</i>	Office Location <i>Brooklyn SO</i>	Phone Number <i>2875 N 8 ST Brooklyn, NY 718-266-3512</i>
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INCIDENT REPORTED TO

Date Reported <i>5-5-14</i>	Person Reported To <i>Geri P. Piro</i>	Title <i>SMVRI</i>
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INCIDENT

Date <i>5-5-14</i>	Time <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Location of Occurrence <i>in front of service counter</i>
DFI Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DFI Contact Name	

EMPLOYEES INVOLVED

Name <i>David Smart</i>	Title <i>Security Guard</i>
Name	Title
Name	Title

OUTSIDE INDIVIDUALS INVOLVED

Name <i>MARIO CAPPAZZO</i>	Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Phone	Client ID #
Address	City	State	Zip Code
Name	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone	Client ID #
Address	City	State	Zip Code
Name	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone	Client ID #
Address	City	State	Zip Code

WITNESSES

Name	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone
Address	City	State Zip Code
Name	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone
Address	City	State Zip Code
Name	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone
Address	City	State Zip Code

Continue on other side

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EXHIBIT

Exhibit 20

Description of Events Leading to the Incident and What Occured:

WU050514B

Mario Cappagrosso accused David Smart of looking at him + there were heated words exchanged.
P.O. Nielsen intervened.

Nature and Extent of Injuries:

No injuries.

Additional Comments:

Mr Cappagrosso has written a letter to Judge Gelbstein.
see Attached.

Geri Piparo

Name of Individual Filing Report



Name of Supervisor

Geri Piparo

Signature of Individual Filing Report



Signature of Supervisor

5-9-14

Date

5-9-14

Date